

PROJECT OVERVIEW

The Substance Abuse and Mental Health Services Administration's (SAMHSA) Center for Substance Abuse Prevention (CSAP) awarded the Southern Nevada Health District (SNHD) with the First Responders-Comprehensive Addiction and Recovery Act (FR-CARA) grant in September 2017. Through the FR-CARA project, SNHD widely distributes naloxone kits, a medication that can counter the effects of an opioid overdose, across Nevada to combat the growing impacts of the opioid crisis. The purpose of this program is to allow first responders and members of other key community sectors to receive naloxone trainings and naloxone kits, so they have the necessary tools to respond to a suspected opioid overdose. Each kit that is distributed includes one dose of intranasal naloxone, one pair of latex gloves, an instructional card, and a CPR face shield. Additionally, SNHD's FR-CARA team values the importance of linking those who have overdosed to an appropriate treatment center; therefore, every naloxone kit has a referral to an Integrated Opioid Treatment and Recovery Center. The project period for the FR-CARA project began in September 2017 and will continue until September 2021.

The FR-CARA activities are concentrated in, but not limited to, Clark County, NV. In the FR-CARA model, naloxone training is provided through presentations to first responders (e.g., EMS, Fire, and law enforcement) and lay responders (e.g., people who use opioids, friends and family of people who use opioids, and service providers). This report outlines the progress and outcomes of naloxone education and naloxone distribution through grant year 4, which began on October 1, 2020, and concluded on September 30th, 2021.

Table 1: Grant Year 4 Naloxone Training & Distribution Totals	
Total number of naloxone kits	8,769
distributed	
Number of naloxone kits	5,765
distributed to first responders	
Number of naloxone kits	3,004
distributed to lay responders	
Total number of trainings	29
Total number trained on naloxone	679
Total first responders trained	448
on naloxone	
Total lay responders trained	231
on naloxone	
Number of Recipients Completing a	585
post-training survey	

REQUIRED MEASURES

- 1. The number of first responders and members of other key community sectors equipped with a drug or device approved or cleared under the Federal Food, Drug, and Cosmetic Act for emergency treatment of known or suspected opioid overdose;
- 2. The number of opioid and heroin overdoses reversed by first responders and members of other key community sectors receiving training and supplies of a drug or device approved or cleared under the Federal Food, Drug, and Cosmetic Act for emergency treatment of known or suspected opioid overdose;
- 3. The number of responses to requests for services by the entity or sub-grantee, to opioid and heroin overdose; and
- 4. The extent to which overdose victims and families receive information about treatment services and available data describing treatment admissions.



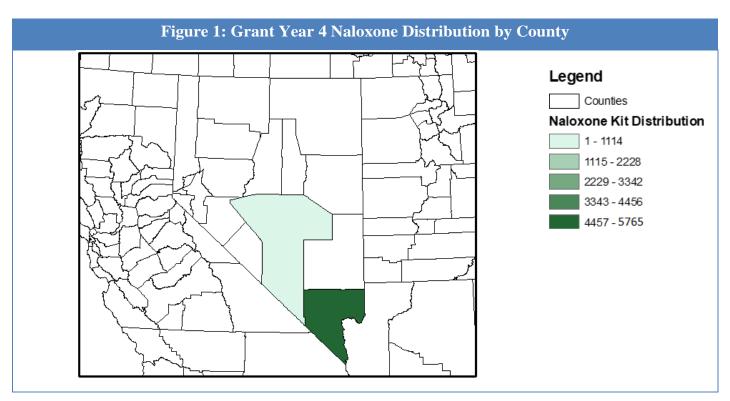
To capture the required measures listed above, data are collected through:

- 1. Post-training surveys, completed after attending a naloxone training.
- 2. Online refill surveys, completed whenever a replacement kit is issued (e.g., due to expiration, use in an overdose).
- 3. Training sign-in sheets, filled out for each naloxone training.
- 4. Naloxone distribution logs, filled out after the distribution of naloxone.

NALOXONE DISTRIBUTION

VOLUME TOTALS

Between October 1st, 2020, and September 30th, 2021, the FR-CARA project distributed 8,769 naloxone kits, including 5,765 kits to first responders and 3,004 kits to lay responders. Naloxone distribution to recipients by county is detailed in both Figure 1 and Table 2.





FIRST RESPONDERS

The first responders that received naloxone and/or went through the overdose response and naloxone administration training included law enforcement personnel from the NV Dept of Wildlife, Attorney General's Office, Department of Public Safety, Mesquite Police Department, Community Ambulance, Henderson Police Department, Las Vegas Paiute Police Department, LVMPD, UNLV Police Services, Florence McClure, Sands/Venetian/Palazzo Security, Las Vegas Fire and Rescue, Las Vegas City Jail, DEA Las Vegas, Nevada Transportation Authority, BLM - Colorado River District, Boulder City Police Department, High Desert & Southern Desert, and Henderson Police Department.

LAY RESPONDERS

The lay responders that received naloxone and/or went through the overdose response and naloxone administration training included individuals from Crossroads Recovery, SNHD Pharmacy, Foundation for Recovery, Church of Nazarene, Westcare, Forward Impressions, UNLV School of Medicine, Rape Crisis Center, Nye Communities Coalition, Vance Johnson Treatment Center, Desert Parkway, Serenity Health, PACT Coalition, Las Vegas Thrive Solutions, Bridge Counseling, Riverside Casino, Catholic Charities, Puentes Las Vegas, and SNHD.

OUTCOMES OF OVERDOSE RESPONSE AND NALOXONE TRAINING

Among first responder and lay responder recipients, 585 (84%) recipients completed a post-training survey. The vast majority of recipients reported high levels of confidence to respond to an overdose (Figure 4). The majority of participants also reported high levels of confidence in understanding the Good Samaritan Law (Figure 6) and learning something new during the training

Year 4 Naloxone
Kit Distribution
by County

Clark 8,636

Elko 0

Nye 133

Washoe 0

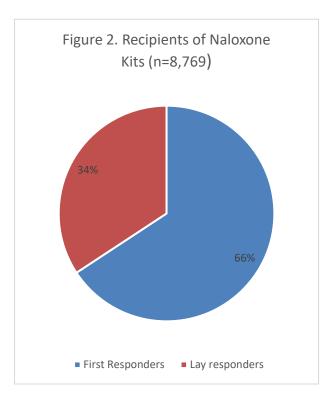
Lincoln 0

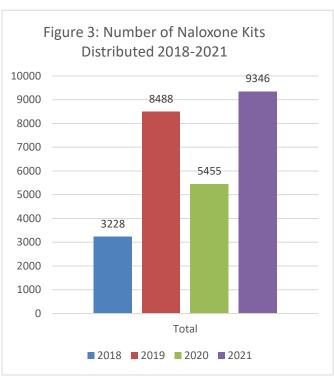
Total 8,769

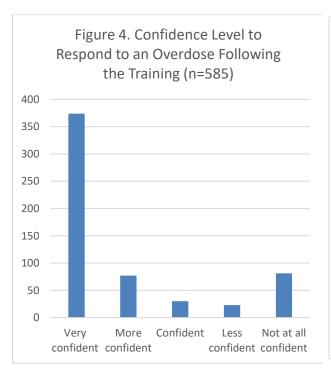
Table 2: Grant

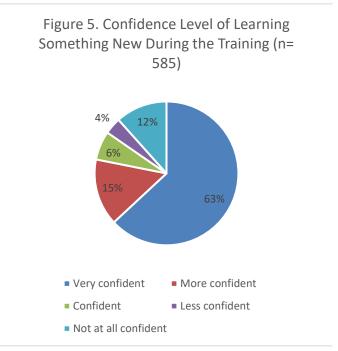
(Figure 5). There lies an opportunity to improve the data collection of naloxone administration data through the online survey as it remains underutilized (Figure 7).



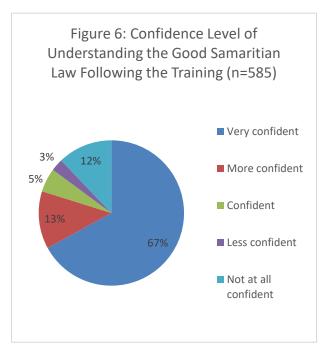


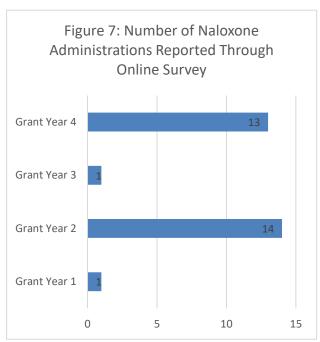












CONCLUSION

Naloxone training and distribution during grant year 4 was considerable throughout Southern Nevada and demonstrates that leveraging SNHD, the local health district, for training and distribution had the capacity for widespread, regional reach. However, the loss of operational capacity due to the COVID-19 pandemic was significant during grant year 4. The FR-CARA project team redirected efforts to contribute to COVID-19 surveillance and disease investigations; therefore, many of the planned trainings and distributions were delayed. The presented data highlight opportunities for further expansion of naloxone training and distribution with additional public safety agencies, notably, Nevada's High Intensity Drug Trafficking area and casino security on the Las Vegas strip. Future work is needed to improve the collection of naloxone administration data through the online survey. In closing, the data captured through grant year 4 have shown that SNHD is meeting the requirements set out by SAMHSA and naloxone trainings and naloxone distribution decreased compared to the prior grant year due to COVID-19.

Table 3: Key Conclusions from Grant Year 4

SNHD's FR-CARA Project is effectively reaching first responders and lay responders throughout Nevada.

SNHD'S FR-CARA Project training efforts increased first responders and lay responders reported knowledge, skills, and confidence to prevent and intervene with opioid overdoses.

Despite of COVID-19, grant year 4 represented a 29% increase in naloxone distribution compared to grant year 3.

Concentrating naloxone distribution through education presentations is an effective strategy to reach first responders and lay responders as well as to ensure they know how to recognize and respond to an opioid overdose.